

## Exemption Process - Single-Site Worker Restriction at an Acute Care Outbreak Site

- Submissions for multiple workers must share requested sites and rationale, otherwise use additional form(s).
- List all positions within and outside of AHS/Covenant.
- Exemptions should try to limit the number of different sites the person is working at, to the greatest extent possible.
- Services which can be provided virtually do not require exemption.

Name (Last name,first name)	Employee ID CPSA / CAMD		Phone Number Position						
Outbreak Site / Service Location									
	Name								
Requesting Operations or Medical Lead	Phone								
	Position								
Outbreak Site / Service Operations or Medical Lead	Name								
	Phone								
	Position								
What sites will the worker be working at if exemption approved (list all)?									
Rationale for exemption									
Approval									
Operations / Medical Lead Name		Signatur	е		Date (dd-Mon-yyyy)				

Page 2 of this form contains submission information as well as ZEOC approvals including Zone Medical Director(s) and the Zone Medical Officer(s) of Health. 21663(2020-09) Page 1 of 2



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FOR INTERNAL USE ONLY								
ZEOC WHS Lead signature indicates that all workers being approved for exemption have been screened for contact risks related to COVID-19 and do not require work restriction (or self-isolation).								
APPROVALS	Zone	Name		Signature	Date (dd-Mon-yyyy)			
ZEOC WHS Lead								
ZEOC Director								
Zone Medical Director								
Zone Medical Officer of Health (MOH)								
In the event the sites where worker(s) intend to work are in more than one Zone, the ZEOC Director, Zone Medical Director and Zone MOH from each Zone need to sign the form.								
ZEOC Director								
Zone Medical Director								
Zone Medical Officer of Health (MOH)								
ZEOC Director								
Zone Medical Director								
Zone Medical Officer of Health (MOH)								
Exemption Decision Comments								
Operations / Medical Lead - please submit the completed form to your Zone Emergency Operation Center (ZEOC) for approval. Your ZEOC will notify you of the exemption decision.								
		Edmont						
PCH.ZEOCNorth@		ZEUC.Edmo	onton@ahs.ca ZEOC.Central@ahs.ca					
Calgary Zone ZEOC.Calgary@ahs.ca		South Zone ZEOC.South@ahs.ca						